FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2019 APR 29 AM 11: 26

Office USEPONY HALL CENTER

| 1. NAME OF COMMITTEE (in full) | (Check if name is changed) | Example: If typing, type over the lines. | 12FE4M5 | |
|-----------------------------------|--|---|--------------------------------------|---------------------------------------|
| Grow Up & Be F | ree PAC | | | 1 |
| | 1. | 1. 1 1 1 1 1 1 1 1 1 1 | | |
| | | | | |
| ADDRESS (number and street) | 830 W. IL Rt. 22, #B56 | | | لببب |
| (Check if address is changed) | Lake Zurich | | , ii , , 60047 , | لسب |
| io onangou, | Lake Zulici | | L 6004/ | لبيا |
| | | CITY | STATE ZIP COI | DE |
| COMMITTEE'S E-MAIL ADDRE | SS (Please provide only one e | e-mail address) | | |
| | anthonyobert.barry@ | gmail.com | | 1111 |
| (Check if address is changed) | helene731@gmail. | .com | | لبب |
| COMMITTEE'S WEB PAGE AD | DRESS (URL) GrowupbefreePAC.com | 1111111 | | |
| is changed) | | 1111111 | | لببيا |
| мм/ b 2. DATE 04 2 | D / Y Y Y Y 3 2013 | | | |
| 3. FEC IDENTIFICATION N | UMBER C | | | |
| 4. IS THIS STATEMENT X | NEW (N) OR | AMENDED (A) | | |
| i certify that I have examined to | his Statement and to the bes | t of my knowledge and belief i | t is true, correct and complete. | · · · · · · · · · · · · · · · · · · · |
| | Uatama BA BAHILA SAFAR | | | |
| Type or Print Name of Treasure | Helene M. Miller-Walsh | | | |
| Signature of Treasurer Helene | M. Miller-Walsh | ue M. Milles | Date Of Z6 | žŏľŠ |
| NOTE: Submission of false, erron | • | may subject the person signing | this Statement to the penalties of 2 | U.S.C. §437g. |
| Office Use | | For further information Federal Election Commiss Toll Free 800-424-9530 | | |

| | COMMITTEE Committee: | |
|------------------------------|--|---------------------------------------|
| (a) | This committee is a principal campaign committee. (Complete the candidate information below | v.) |
| (b) | This committee is an authorized committee, and is NOT a principal campaign committee. (Co information below.) | mplete the candidate |
| Name of Candidate | | |
| Candidate Party Affiliati | Office on Sought: House Senate President | State |
| | | District |
| (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| Name of Candidate | | |
| Party Con | nmittee: | |
| (d) | (National, State This committee is a or subordinate) committee of the | (Democratic, Republican, etc.) Party. |
| Political A | ction Committee (PAC): | |
| (e) | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.) | onnected organization is a: |
| | Corporation w/o Capital Stock | Labor Organization |
| | Membership Organization Trade Association | Cooperative |
| | In addition, this committee is a Lobbyist/Registraot PAC. | |
| (f) × | This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee) | segregated fund or party |
| | In addition, this committee is a Lobbyist/Registrant PAC. | |
| | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) | |
| Joint Fund | Iraising Representative: | |
| (g) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a findoral camildate | two or more political |
| (h) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate. | two or more political |
| Com | mittees Participating in Joint Fundraiser | |
| 1. | FEC ID number C | |
| 2. | FEC ID number C | |
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| 4. | | |

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| | Vrite or Type Com | | | • | | | | | | |
| (| Grow Up | & Be I | Free PA | C | | | | | | |
| 6. | | | | | ittee, Joint I | Fundraising Re | presentative, | or Leaders | hip PAC Sponsor | |
| N | ONE | | | 1111 | | | | | | |
| L | | | | | | 1111 | | | <u> </u> | Ш |
| | Mailing Address | | | | | | | | | Ш |
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| | | | | CITY | | | STATE | | ZIP CODE | |
| | Relationship: | Connected | 1 Organization | Affiliated Cor | mmittee | Joint Fundraisi | ng Representa | itive Le | adership PAC Spor | isor |
| ١. | Custodian of Robooks and recor | | itify by name, a | ddress (phone | number o | ptional) and po | sition of the p | erson in po | ssession of commit | tee |
| | Full Name | Helene M. | Miller-Walsh | Mn Park Ave. | | 1111 | | | 11111 | اب |
| | Mailing Address | | | | | | 1. 1 .1 1 | | | Ш |
| | | | | 1.111 | 1111 | | <u></u> | .60051 | | Ш |
| | | | McHenry | 1,1111 | 1111 | لبب | لــــا | | | Ш |
| | Title or Position | | | CITY | | | STATE | | ZIP CODE | |
| | Treasurer | | 1111 | | | Telephone n | umber | 312 | 451 - 4092 | <u>ப</u> |
| В. | Treasurer: List tany designated a | he name an agent (e.g., a | d address (phor assistant treasur | ne number op rer). | otional) of th | e treasurer of t | he committee; | and the na | nme and address o | f |
| | Full Name of Treasurer | Helene M. | Miller-Walsh | 1 1 1 1 1 1 | 1 1 1 1 | | | | <u> </u> | لــا |
| | Mailing Address | | 2210 Woodlaw | vn Park Ave. | 1. 1. 1. 1 | | | | | |
| | · | | | | | | 1 1 1 1 1 | | <u> </u> | |
| | | | McHenry | | | | _ | 60051 | | لــا |
| | Title or Position | | | CITY | | | STATE | | ZIP CODE | |
| ı | Treasurer | | 1111 | | ل | Telephone n | umber | 312 | 451 - 4092 | ال |

| | 1 1 (Revised 02/2009) | | | | Page 4 |
|---|--|-----------------------------|-------------------------|-------------------|-------------|
| | | | | | |
| Full Name of | | | | | |
| Designated Agent | | | <u> </u> | | |
| Mailing Address | 1 | | | | |
| walling Address | 1 | | 1 . I, I I I I I | | |
| | <u> </u> | | | | 1 1 1 1 1 1 |
| | | | با ليسب | بنا ل | |
| | | CITY | STAT | E | ZIP CODE |
| Title or Position | | 1 | Talankana musikan | 1 1-1 | !=! |
| | | | Telephone number | ا - لــلـــا | |
| | | | | | |
| | Depositories: List all banks ixes or maintains funds. | or caller depositories in t | vnich the committee de | posks lulius, lio | |
| | oxes or maintains funds. Depository, etc. | | mich the committee de | posits farius, no | |
| | xes or maintains funds. | | unich the committee de | | 11111 |
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** 4/24/12 Delivery Confirmation[™] or Signature Confirmation[™] Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 4/29/13 DATE PREPARED

(3/2005)